PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

+ :360 =

ADD'L FEE

TOTAL

OR

OR

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application for Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART! OTHER THAN (Column 1) SMALL ENTITY OR SMALL ENTITY (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 * X S OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter *0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDI-RATE ADDI-**AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL MENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(cj) Minus S x : <u>25</u> = x : 50 OR M Minus (37 CFR 1,16(b)) x : 100 x , 200 . FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) +:180 = OR : 360= TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω REMAINING NUMBER PRESENT RATE ADDI-TIONAL RATE ENT AFTER AMENDMENT PREVIOUSLY **EXTRA** TIONAL PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus TENDM - کلے: × × s<u>50</u> = OR independent D7 CFR 1.16(b)) Minus x s /00 = OR × s<u>&</u>00= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d)) + :360 = + : 180 = OR TOTAL 90 ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST PRESENT NUMBER RATE ADD1-RATE ADDI AFTER AMENDMENT **PREVIOUSLY EXTRA** TIONAL TIONAL PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus ENDM x :25 = x : <u>50</u> = independent (37 CFR 1.16(b)) Minus x : 200. x \$_100 = OR

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(0))

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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+:150=

AOD'L FEE

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"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".